Editor

DWIGHT L. WILBUR, M.D.

Assistant to the Editor ROBERT F. EDWARDS

For information on preparation of manuscript, see advertising page 2 Policy Committee-Editorial Board

JAMES C. MACLAGGAN, M.D., San Diego JOHN G. MORRISON, M.D., Sacramento WILLIAM F. QUINN, M.D., Los Angeles JOSEPH W. TELFORD, M.D., San Diego CARL E. ANDERSON, M.D., Santa Rosa HELEN B. WEYRAUCH, M.D. San Francisco

DWIGHT L. WILBUR, M.D., San Francisco

California Medicine



EDITORIAL

Annual Session, 1966

AT ITS 95TH ANNUAL MEETING the CMA dealt extensively with matters having a bearing on the operation of government-sponsored medical care plans, adopted statements of attitude on several pressing questions affecting public health, conducted internal business of the Association and carried out an extremely successful program of scientific meetings.

In resolutions concerned with making governmental medical care programs workable within the framework of sound medical practice, the House of Delegates:

- Expressed concern that the American people seem to be expecting more from Medicare than the plan entails and urged an educational campaign to notify them that the plan does not provide payment in full for the entire medical care for those who are covered, without exclusions or "deductibles."
- Asked that the Medicare legislation be amended to permit a patient to be paid on presentation of the physician's bill rather than a receipted bill. This would help to maintain the patient's normal pecuniary role in the physicianpatient relationship and to forestall the possible development of a system under which the patient abandoned his position as the buyer of a service and let the business of medical care and the payment for it become a transaction between the physician and a governmental agency.
- Voted to ask the American Medical Association to bring to the attention of appropriate federal agencies the responsibility of government hospitals for establishing active utilization review

committees such as those required in hospitals in which patients are treated under Medicare.

- Resolved that California Medical Association representatives and CMA-associated organizations use "usual, customary and reasonable" fees as the basis for negotiation of contracts or agreements involving payment for physician's services.
- Reassured physicians that hospital medical staffs and their committees are responsible solely to their medical staffs and not to government or other outside agencies.

Four resolutions took up questions in which there has been growing public interest in recent years. On these issues the House of Delegates acted as follows:

- Supported the concept of medically justifiable abortion, taking into consideration the health of both the mother and the product of conception. and recommended that legislation to this end should provide proper medical control through established hospital staffs or component medical society committees.
- Referred to the Council for further study a resolution urging the State Legislature to reclassify marijuana from a "narcotic drug" to a "dangerous drug" and that the CMA study narcotics and dangerous drugs with the aim of revising present laws and their enforcement where advisable.
- Approved the support and encouragement of "implied consent," legislation in California under which anyone receiving a driver's license in the state tacitly would assent to the extraction of a blood specimen in certain conditions when he is suspected of driving while drunk.
- Adopted a resolution that physicians be reminded of legal requirement that they report cases